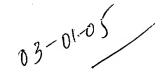
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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5 Z2851 7	CE ADDRESS (Note: Use Block 1 for 590 12/14/2004	any change of address)	PER		Note: A certificate of Fee(s) Transmittal. The papers. Each additional have its own certificate.	mailing can only be used for is certificate cannot be used all paper, such as an assignment of mailing or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must
DELPHI TECHNOLOGIES, INC. M/C 480-410-202 PO BOX 5052 TROY, MI 48007 03/02/2005 ZJUHAR2 00000117 500831 10075319		FEB	FEB 2 8 2005		Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
7370272005 ZJUHAR2 00000117 500831 10075319			MBEM)	<u>Susa</u>	-651546,	(Depositor's name)
01 FC:1501 1400.0 02 FC:1504 300.0 03 FC:8001 6.00	O DA	EV 312956936	5 US		مىك	e Gah	(Signature)
APPLICATION NO.	FILING DATE	FII	RST NAMED	INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/075,319 02/14/2002			W. James Allen			DP-305970	8681
TITLE OF INVENTION: ON-CHIP INSTRUMENATION							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO \$1400			\$300		\$1700	03/14/2005
EXAMINER		ART UNIT	ART UNIT		ASS-SUBCLASS		
DUNCAN, MARC M		2113	2113		714-045000		·
1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Stefan V. Chmielewski 2 3					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) DELPHI TECHNOLOGIES, INC. TROY, MICHIGAN							
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):							
☐ Issue Fee ☐ A check in the amount of the fee(s) is enclosed.							
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5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
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Authorized Signature	Susa 6				Date	728-05	-
Typed or printed name Susan Grish. Registration No.							
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